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| **ONLINE PAGE NO.** | **QUESTION**  | **DATA POINT**  | **DEFINITION CRITERIA**RN=Registered NurseLPN=License Practice Nurse LVN=Licensed UAP= Unlicensed Assistive Personnel (non RN or non LPN) FTE=Full-time Equivalent (based on teacher FTE) | **DATA POINT** |
| 2 |  | Number of enrolled students in district | **Enrolled students**: Use district’s official (third Friday count) number. |  |
| **PART 1 -- Health Personnel Information** |
| 3 | A. | Total number **of RN FTEs** with an assigned caseload providing **direct services**  | **Direct services.** Means responsible for the care of a defined group of students in addressing their acute and chronic health conditions**.** It includes case management, health screenings and health promotion activities. Direct services also include care provided by members of a health care team including LPNs or unlicensed assistive personnel.Include long-term substitutes.**Do not include RNs, LPNs, UAPs working with medically fragile students (1:1, 1:2, 1: 3, 1: 4 or 1:5).****Do not include % of administrative assign-ment for RN. Case management FTEs included under administrative or supervisory FTEs.** |  |
| 3 | B. | Total number **of RN FTEs** with **special assignment**  | Include RNs working with limited caseload providing direct services such as medically fragile students (1:1, 1:2, 1: 3, 1: 4 or 1:5). |  |
| 3 | C. | Total number of **RN FTEs** providing **administrative or supervisory** school health services | RNs providing management/clinical supervision to RNs, LPNs, or other health extenders, UAPs, or conducting other administrative health services, e.g. case management. |  |
| 3 | D. | Total number of **LPN FTEs** with an assigned caseload providing **direct services** | See definition of direct services above. |  |
| 3 | E. | Total number of **LPNs FTEs** with **special assignment** | Include LPNs working with limited caseload providing direct services such as medically fragile students (1:1, 1:2, 1: 3, 1: 4 or 1:5). |  |
| 3 | F. | Total number of **UAP FTEs** with an assigned caseload that includes providing **direct health services** | See definition of direct services above. |  |
| 3 | G. | Total number **of UAPs FTEs** with **special assignment** | Include UAPs working with limited caseload providing direct services such as medically fragile students (1:1, 1:2, 1: 3, 1: 4 or 1:5). |  |
| 3 | H. | Total number of assistant FTEs providing administrative support services to RNs or LPNs | Assistants providing administrative support services to RNs or LPNs/LVNs, e.g. clerical assistance. Do not include FTEs spent doing non-health related clerical activities**.** |  |
| **PART 2 -- Health Services Provided** |
| 4 | K. | **Complex procedures**. Report number of students receiving complex procedures ordered by a medical provider. | Enter the number of students requiring the procedure at school, not the number of times the procedure was performed. A student may be entered in more than one category if he/she had more than one procedure. Include students who were enrolled at any time during the current school year even if they have been withdrawn or dropped out. Only include students for which a healthcare provider ordered the procedure to be done during school hours or during a school sponsored activity.**If no students required the procedure, enter a numerical zero (0).****If your district/school does not collect this information then enter DNC** |  |
| 4 | a) | Urinary Catheterization | See definition above. |  |
| 4 | b) | Wound Care (i.e. dressing changes) | See definition above. |  |
| 4 | c) | Glucose Monitoring  | See definition above. |  |
| 4 | d) | Carbohydrate Counting  | See definition above. |  |
| 4 | e) | Nebulizer Treatment  | See definition above. |  |
| 4 | f) | Ostomy Care (Colostomy, Ileostomy, Jejunostomy) | See definition above. |  |
| 4 | g) | NG/G Tube Care (includes care, feeding and/or medication) | See definition above. |  |
| 4 | h) | Oral Suctioning | See definition above. |  |
| 4 | i) | Tracheal Suctioning/ Trach Care | See definition above. |  |
| 4 | j) | Ventilator Care | See definition above. |  |
| 4 | k) | Oxygen Delivery | See definition above. |  |
| 4 | l) | Other (specify) | “Other” examples include range of motion exercises, peak flow measurements, feeding assistance, IV/Heparin flush, oxygen sat-uration readings, weight measurements, etc. |  |
| 4 | L. | **Medications:**1. Record the total number of students with **order to receive dose(s) of medication administered by school district staff or self-administered.**
 | Record number of known students with orders to administer medications at school, not number of doses administered. Count students with valid medication consent for prescription and over the counter medications on file even if doses self-administered. Include students who were enrolled at any time during the current school year even if they have withdrawn or dropped out. **If your district/school does not collect this information then enter DNC.** |  |
| 4 | a) | Students with orders for **daily/regular scheduled prescription** medications. | See description above. |  |
| 4 | b) | Students with **prescription orders** for **non- emergency PRN** or as needed medications. | See description above. |  |
| 4 | c) | Students with **prescription orders for emergency or urgent medication** (e.g. Glucagon, diastat, epinephrine- not all inclusive list)  | **Include all orders for inhalers.** |  |
| 4 | d) | Students with **consents for over-the-counter medication** (Tylenol/Ibuprofen, etc.)  | See description above. |  |
| 4 | M | **Screenings** | If your district/school does not collect this information then enter **DNC**. If no screening or referral completed then enter a numerical zero (0). |  |
| 4 | a) | **Height and Weight (BMI)**Screened for height and weight | Report number of students with a health population screenings at school, regardless of which staff or agency conducts the screening. |  |
| 4 | b) | Referred for height and weight |  |  |
| 4 | a) | **Vision Screening**Screened for vision | Report number of students with a health population screenings at school, regardless of which staff or agency conducts the screening. |  |
| 4 | b) | Referred for vision |  |  |
| 4 | a) | **Hearing Screening**Screened for hearing. | Report number of students with a health population screenings at school, regardless of which staff or agency conducts the screening. |  |
| 4 | b) | Referred for hearing |  |  |
| 5 | N | **Meetings** |
| 5 | a) | Number of **IEP assessment or planning meetings** attended by RN. | Record number of meetings attended. May include multiple meetings for same student. If your district/school does not collect this information then enter DNC. If RN did not attend any such meeting, enter zero (0). |  |
| 5 | b) | Number of **504 assessment or planning meetings** attended by RN. | Record number of meetings attended. May include multiple meetings for same student. If your district/school does not collect this information then enter DNC. If RN did not attend any such meeting, enter zero (0). |  |
| 5 | c) | Number of **Student Intervention meetings** attended by RN. | Record number of meetings attended. May include multiple meetings for same student. If your district/school does not collect this information then enter DNC. If RN did not attend any such meeting, enter zero (0). |  |
| 5 | O | **Presentations Given** | Each inservice or class = 1 session. Include sessions RN coordinates or conducts as a self-study with a Q&A opportunity, such as bloodborne pathogens training. |  |
| 5 | a) | Staff inservice/training sessions | See definition above. |  |
| 5 | b) | Student health education presentations | See definition above. |  |
| 5 | c) | Parent or community group presentations  | See definition above. |  |
| 5 | P | **Student Health Encounters and Disposition RN** |
| 5 |  | **Number of student encounters/ health office** **visits to RN** | Include only students who are seen (face-to-face) by RN. |  |
| 5 | a) | RN Disposition: **Return to class or stayed in school** | Include only students who are seen (face-to-face) by RN. |  |
| 5 | b) | RN Disposition: **EMS (911) called** | Include only students who are seen (face-to-face) by RN. |  |
| 5 | c) | RN Disposition: **Student sent home or released from school** | Include only students who are seen (face-to-face) by RN. Includes students sent home with the recommendation/directive to see a healthcare provider. |  |
| 5 | Q | **Student Health Encounters and Disposition LPN** |
| 5 |  | Number of student encounters/health office visits to LPN  | Include only students who are seen (face-to-face) by LPN (not RN). |  |
| 5 | a) | LPN Disposition: **Return to class or stayed in school** | Include only students who are seen (face-to-face) by LPN. |  |
| 5 | b) | LPN Disposition: **EMS (911) called** | Include only students who are seen (face-to-face) by LPN. |  |
| 5 | c) | LPN Disposition: **Student sent home or released from school** | Include only students who are seen (face-to-face) by LPN. Includes students sent home with the recommendation/directive to see a healthcare provider. |  |
| 5 | R | **Student Health Encounters and Disposition UAP**  |
| 5 |  | Number of student encounters/health office visits health aide/UAP | Include only students who are seen (face-to-face) by other health UAP staff (non-RN, non- LPN). May include secretary or other IF it is included as a specific part of their response-bility. Do not include if seen by RN or LPN. |  |
| 5 | a) | UAP Disposition: **Return to class or stayed in school** | Do not count if seen by RN or LPN. |  |
| 5 | b) | UAP Disposition: **EMS (911) called** | Do not count if seen by RN or LPN. |  |
| 5 | c) | UAP Disposition: **Student sent home or released from school** | Do not count if seen by RN or LPN. |  |
| **PART 3 -- Chronic Conditions** |
| 6 | S | Record the number of students in each category with a medical diagnosis from a healthcare provider. | Medical Diagnosis refers to documentation of a diagnosis from a licensed healthcare provider/prescriber. For example if parents say their child has asthma, etc., but does NOT provided documentation from a healthcare provider, the child should NOT be included in this count.Count students who were enrolled at any time during the current school year even if they have withdrawn or dropped out. Count students who had diagnosis at start of school year or were diagnosed at any point during the school year.**Student may be counted in more than one category if they have multiple diagnoses**.Lists of possible conditions for inclusion are not exhaustive or all inclusive. **If your district/school does not collect this information then enter DNC. If information collected but, no students have a condition enter a numerical zero (0).** |  |
| 6 | a) | Attention Disorder | See definition above. |  |
| 6 | b) | Life threatening Allergic Disorder (Student has medically diagnosed severe allergy that has the potential to cause death.) | See definition above. |  |
| 6 | c) | Non-life threatening Allergic Disorder (Student has medically diagnosed seasonal, perennial, food/chemical/drug/or inset allergy that is not known to have the potential to cause death - allergic rhinitis , localize swelling.) | See definition above. |  |
| 6 | d) | Asthma | See definition above. |  |
| 6 | e) | Cancer (Leukemia, tumors, and other forms of cancer) | See definition above. |  |
| 6 | f) | Cardiovascular (Clinically significant cardiac murmurs, cardiac insufficiency, arrhythmias, pace makers, hypertension, Kawasaki’s disease, Raynaud’s syndrome)  | See definition above. |  |
| 6 | g) | Congenital/Genetic (Down syndrome, Fragile X Syndrome, Turner Syndrome, other syndromes)  | See definition above. |  |
| 6 | h) | Diabetes Type 1 | See definition above. |  |
| 6 | i) | Diabetes Type 2 | See definition above. |  |
| 6 | j) | Eating Disorders | See definition above. |  |
| 6 | k) | Eye (Blindness, amblyopia and other eye diseases/conditions. Do not count basic corrective eyewear) | See definition above. |  |
| 6 | l) | Gastro-Intestinal (GERDS, ulcers irritable bowel syndrome, encopresis, Celiac Disease, Crohn’s Disease, colostomy) | See definition above. |  |
| 6 | m) | Genito-Urinary (Voiding dysfunction including enuresis, bladder disease, urostomy, renal disease, dysmenorrhea, endometriosis) | See definition above. |  |
| 6 | n) | Hematology (not including cancers) | See definition above. |  |
| 6 | o) | Musculo-Skeletal (Muscular dystrophy, scoliosis, skeletal dysplasia, fibromyalgia, juvenile rheumatoid arthritis, osteogenesis imperfect) | See definition above. |  |
| 6 | p) | Concussions ( known medically diagnosed concussions) | See definition above. |  |
| 6 | q) | Migraines (known medically diagnosed) | See definition above. |  |
| 6 | r) | Seizure Disorders (known medically diagnosed) | See definition above. |  |
| 6 | s) | Other Neurological Disorders (autism, cluster headaches, spina bifida, cerebral palsy, traumatic brain injury, benign vertigo, and neurofibromatosis) | See definition above. |  |
| 6 | t) | Pregnancy (count female students only. Count student only once unless she becomes pregnant more than once during current school year) | See definition above. |  |
| 6 | u) | Psychiatric - other than eating disorders (Anxiety, depression, bi-polar, obsessive compulsive disorder, suicide ideation, behavior disorder, alcohol use disorder, drug misuse) | See definition above. |  |
| 6 | v) | Respiratory other than asthma ( Chronic bronchitis, tracheostomy/ventilator dependent) | See definition above. |  |
| 6 | w) | Other (Use this category ONLY for diagnoses that cannot be included in one of the reportable categories) | See definition above. |  |
| 6 | T | **Total Number of Students with Special Health Conditions** | A special health care condition is a condition reported by a parent and/or diagnosed by a physician or nurse practitioner.Include all students for which your district consulted, monitored, developed a care plan, provided clinical services, or provided teaching, counseling, or related services.**Do not count students more than once**. Count students who were enrolled at any time during the current school year even if they have withdrawn or dropped out. If your district/school does not collect this information then enter DNC. |  |
| **Part 4 -- District Health Services Practices** |
| 7 | U. | Does the school district bill Medicaid for School Based Services Nursing/Health Services? |  |  |
| 7 | V. | Does your district stock albuterol? |  |  |
| 7 |  | Does your district stock emergency epinephrine? |  |  |
| 7 |  | Does your district stock naloxone? |  |  |
| 7 |  | Does your district stock over- the-counter analgesics? |  |  |
| 7 | W. | Did your district administer any does of Emergency Epinephrine this school year? |  |  |
| 7 |  | Number of doses if known. |  |  |
| 7 |  | How many were doses of stocked Epinephrine? |  |  |
| 7 | X. | Did your district administer any doses of an opioid antagonist this school year? |  |  |
| 7 |  | Number of doses |  |  |